## 1405: 129: 0374

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED

1 0111111			Office Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5 MAIL CENTER
MITICHITIGIAN PETRIOLEWM PAC			
ADDRESS (number and street)	PIOI BIOIXI ILI	510161411111	
(Check if address is changed)			
·	LIAINISITINIGI I		MIT 418191011-5106141  STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADDRESS			
(Check if address is changed)	Office of Mail A	ilcihiilgiainoiilla ddress	indigialsi origini
COMMITTEE'S WEB PAGE ADDRESS (URL)			
☐ ◀ (Check if address is changed)			
	لسسسسس		
2. DATE			
3. FEC IDENTIFICATION NUMBER > C0.0.0.8.3.8.0.8			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.			
Type or Print Name of Treasurer Frin Mc Donough			
Signature of Treasurer	lul	<del></del>	Date 08 15 2014
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.			
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	FEL. ELIBOR L